

Community & Family Health Services

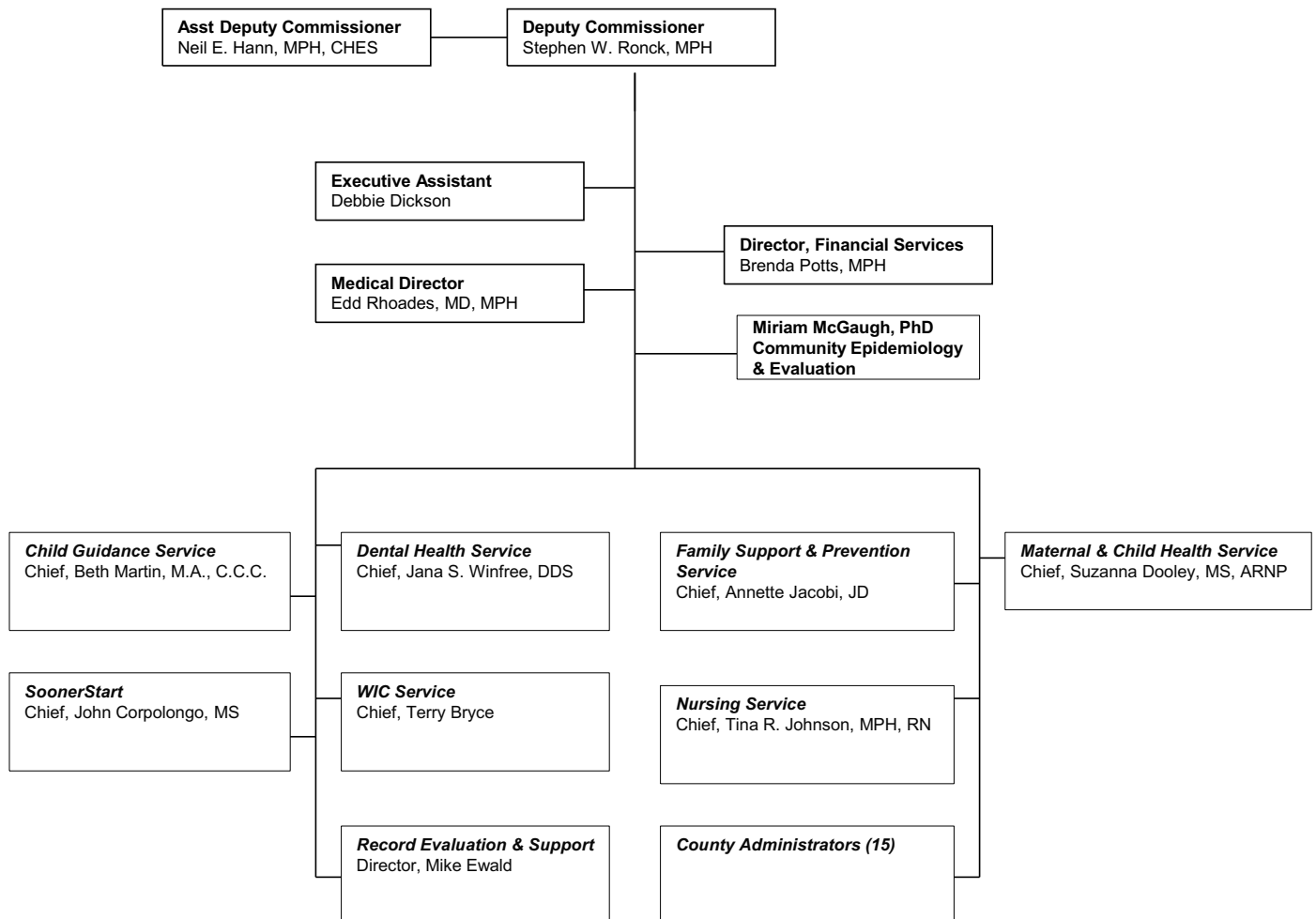
June 7, 2013

**Presented by Stephen W. Ronck, M.P.H.
Deputy Commissioner**



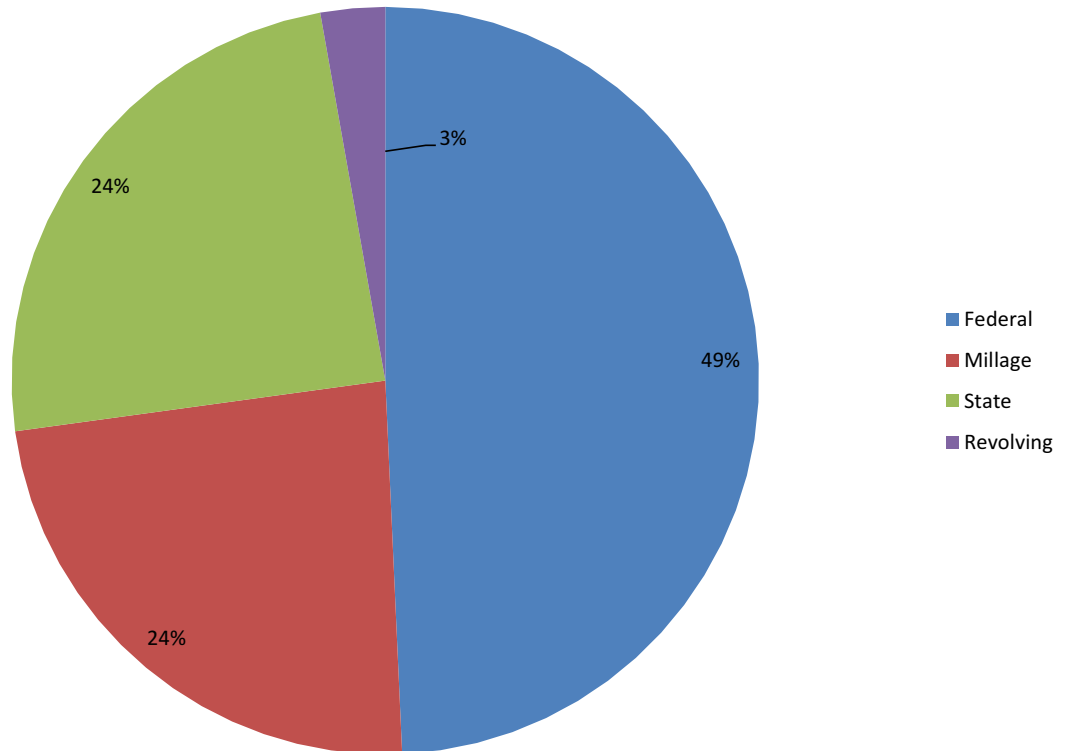
Oklahoma
State
Department
of Health

Community and Family Health Services



COMMUNITY AND FAMILY HEALTH SERVICES COMBINED REVENUES

Total \$171.8M



Does not include \$66 M in WIC Food Costs



Oklahoma
State
Department
of Health

Community and Family Health Services Budget Summary

<i>Expenditure Category</i>	<i>Budget</i>	<i>Percent of Budget</i>
Personnel	\$83,137,755	34.86%
WIC Food Costs	\$66,748,068	27.98%
Professional Services	\$34,946,503	14.65%
Other Expenditures	\$29,218,167	12.25%
Contracts	\$14,514,651	6.09%
Local Government Subdivisions	\$6,029,742	2.53%
Travel	\$3,261,133	1.37%
Equipment	\$664,122	0.28%

C&FHS Average Full Time Equivalent Employees (FTE) for SFY 12 – 1,330.5



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Nursing Services

Service Chief: Tina R. Johnson, MPH, RN

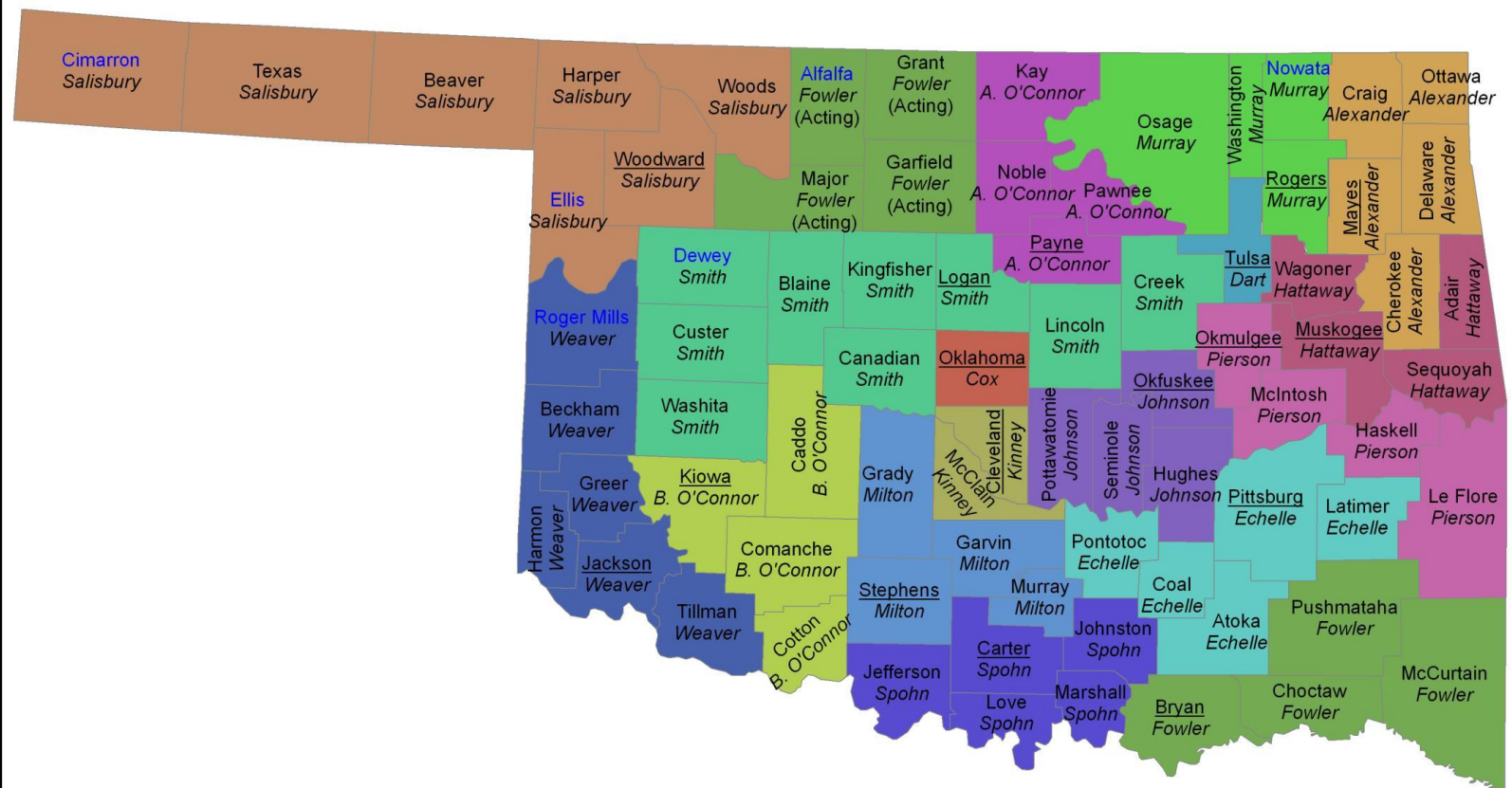
Responsible for the support of public health nurses

- Provides clinical practice guidance through Physician Approved Protocols
- Continuing education and training opportunities
- Performance Improvement activities
- Professional development
- Public Health response and preparedness
- 20% vacancy rate due to budget shortfalls



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COUNTY ADMINISTRATORS (15) AND AREAS OF RESPONSIBILITY



Counties without established health departments lettered in blue

COUNTY HEALTH DEPARTMENTS

- 68 county health departments
- 2 independent city-county health departments*
- 7 counties without county health departments
- Local County Boards of Health
- Medical Directors

Each department offers a variety of services:

- | | |
|--|--|
| • Immunizations | • Speech/Language Services |
| • Family Planning | • Special Screening Services |
| • Maternity | • Children First Nurse Home Visitation |
| • Health, Dental, Nutrition and Child Care Education | • School Health |
| • Child Health | • After School Catch Program |
| • Adolescent Health | • Hearing Screening |

*Oklahoma and Tulsa Counties operate city-county health departments independent from the OSDH health network.



SERVICES CONTINUED

- Child Developmental Services
- Behavioral Health Services
- Environmental Health,
- Early Intervention/Sooner Start Program
- WIC
- All Hazards Response and Preparedness
- STD/HIV
- Tuberculosis
- Communicable Disease Investigation and Control
- Dental Clinical Services
- Injury Prevention
- Adult Health
- Tobacco Use Prevention (TSET)
- Teen Pregnancy Prevention
- Other



COUNTY HEALTH DEPARTMENTS

Tax rates or millage levies are set by procedures in the Oklahoma Constitution or voted directly by the taxpayers. A mill is one-thousandth of a dollar. For convenience in Oklahoma, a tax rate (the sum of all mills levied) is expressed as dollars per thousand dollars of assessed value. A tax rate of 2 mills, for example, would be \$2 tax dollars.

For counties with established county health departments, the county residents have voted to fund a local county health department through either millage, sales tax, or a combination of the two. Millage rates vary from the minimum of 1 mill to a current maximum of 2.5 mills.



April 12, 2011



SFY12 COUNTY HEALTH DEPARTMENT SERVICES/ENCOUNTERS/UNDUPLICATED CLIENTS

SFY12			
PROGRAM	SERVICES	ENCOUNTERS	UNDUPLICATED CLIENTS
ADULT SERVICES	53,950	28,266	19,745
CHILD HEALTH	25,857	23,966	18,319
CHILDREN FIRST^	*	38,698	3,547
DENTAL	5,035	797	403
EARLY INTERVENTION	116,261	114,420	7,852
FAMILY PLANNING	600,885	146,450	70,104
GUIDANCE	24,549	17,553	5,360
IMMUNIZATIONS&	528,069	278,450	234,191
MATERNITY	10,459	2,078	580
STD	139,795	37,444	28,026
TAKE CHARGE	3,056	886	821
TUBERCULOSIS	111,262	55,272	25,759
WIC	2,459,245	242,226	150,523
TOTAL **	4,078,423	986,506	565,230

Notes: Numbers include Oklahoma City-County Health Department or Tulsa City-County Health Department

^Children First data from Children First data system *Services for Children First are included in other program line items.

&Immunization data from OSIS data system **Total information is a sum of above columns. Clients and visits could be duplicated between the three data systems., therefore, overestimating the number of clients and encounters.



COUNTY HEALTH DEPARTMENTS

CONSUMER PROTECTION DEPARTMENTS

SFY12 PUBLIC HEALTH SPECIALIST ACTIVITY SUMMARY*	
Program	Inspections and/or Investigations
Retail Food Service	46,149
Hotel/Motel	1,124
Public Bathing	4,873
Barber	616
Child Care Food Facilities	760
Rabies	667
Complaints	1,128
TOTAL	55,317

*Includes Oklahoma and Tulsa Counties



Child Guidance Service

Service Chief: Beth Martin, M.A., C.C.C.

Child Guidance Program

Target Population: Children birth to age 13, their families, and professionals in the community.

Divisions

- **Behavioral Health**
- **Speech Language**
- **Child Development**

Behavioral Health

- Child Care Mental Health Consultation.
- Evidence based parent and teacher programs (PCIT/Incredible Years).
- Psychological Evaluation and Intervention Services.
- Infant and Early Childhood Strategic Planning and Leadership.



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Speech Language

- Evidence based parent and teacher trainings (Hanen).
- Speech and Language Screening, Evaluation and Intervention.
- Developmental Screening consultation to primary care providers.

Child Development

- Developmental Screening – direct and consultation.
- Evidence based parenting programs (Incredible Years).
- Parenting Education – Practical Parent Education.
- Child Care Mental Health Consultation.

Oklahoma Child Care Warmline FY2012

- 10,477 contacts were received by the Child Care Warmline, 1,659 calls were taken by staff and 8,828 were web contacts.

SFY 12 Child Guidance Service Significant Accomplishments

- 30,127 procedures were provided to 6,207 individual clients.
- 6,000 more encounters were provided than in SFY 2011, representing a 34% increase in services.
- 9,204 screening and assessments were provided; an increase of 1,050 over SFY 2011.

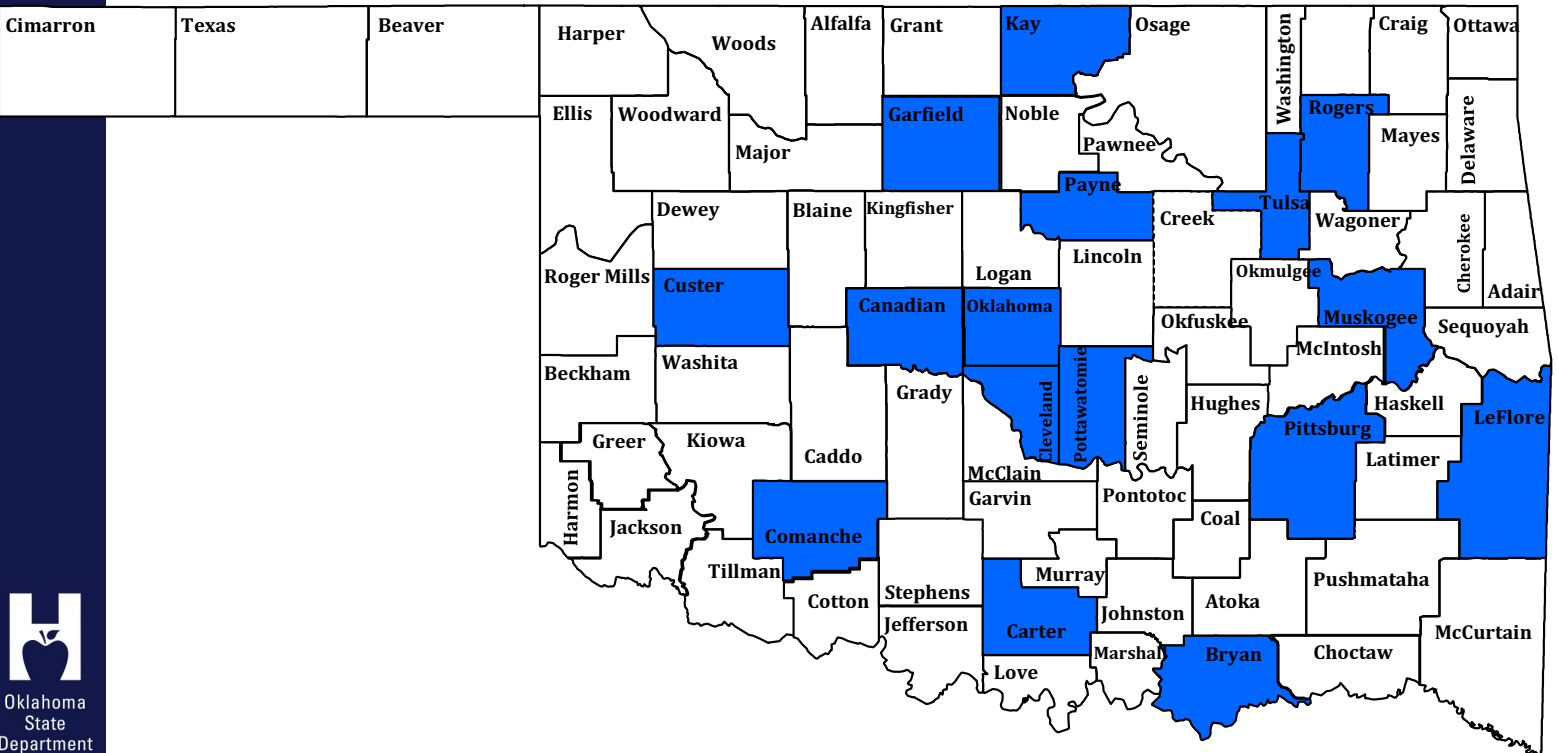
SFY 12 Mental Health Consultation

- 24 clinicians conducted visits
- 955 visits made
- 1,511 total visit hours
- 108 referrals
- 72 Child Care Centers served.



Child Guidance Clinics

April, 2011



Dental Health Service

Service Chief: Jana S. Winfree, D.D.S.

Dental Health Education and Tobacco-Use Prevention Program

Target Population: Children ages 0-18 (primary target grades K-6); Head Start, daycare and WIC participants; nursing home staff; community health fairs, oral health advocates and professionals.

Program Description

- School-based setting includes one lesson given each week for three consecutive weeks.
- Teach proper oral hygiene practices, nutrition, playground safety, & tobacco-use prevention.
- Single lesson presentations are tailored for targeted audiences.

FY 12 Services

- | | |
|--|--------|
| ▪ Counties with active programs | 33 |
| ▪ Children received classroom prevention instruction | 29,327 |
| ▪ Dental education program encounters, all ages | 95,597 |
| ▪ In FY 08 we had 12 Dental Health Educators | |
| ▪ In FY 12 we had 9.5 Dental Health Educators | |



Dental Clinical Care Program

Target Population: Low income, uninsured, non-Medicaid children and pregnant women.

Program Description

- Part-time clinics range from 1 day per month to 1 day per week at 6 county health department sites.
- General dentistry including sealants, fluoride varnish, and oral hygiene instruction.
- Contract with Oklahoma licensed dentists.
- Support the annual Oklahoma Mission of Mercy projects.

FY 12 Services

The Oklahoma Mission of Mercy – McAlester, OK

- | | |
|--|-------|
| ▪ Dental clinical treatment encounters | 1,733 |
| ▪ Dental clinical treatment procedures | 6,487 |
| ▪ Immunizations | 800 |

County Health Department Clinics

- | | |
|--|-------|
| ▪ Dental clinical treatment procedures | 4,748 |
|--|-------|

Community Water Fluoridation Program

Target Population: All Oklahomans on public water systems.

Program Description

- Educate, promote, and support fluoridation efforts within communities.
- Maintain OSDH database on water systems adjusting the fluoride level.
- Maintain database for CDC's My Water's Fluoride website.
- Collaborate with Department of Environmental Quality.

FY 12

- Created a State Fluoridation Plan.
- Initiated a Community Water Fluoridation Outreach Effort.



Oklahoma Dental Loan Repayment Program

Target Population: new dental school graduates (within previous 5 years).

Program Description

- Dental education loan repayment assistance for five Oklahoma licensed dentists per year for up to five years per dentist (maximum 25 full time equivalent dentists if fully funded).
- Four new dental positions in designated shortage areas seeing minimum 30% Medicaid patients, one new full time equivalent on faculty at the OU College of Dentistry.
- \$25,000 per dentist, or full time equivalent, per year.

FY 12

- Partial funding received through the University Hospitals Authority to support 15 FTE participants for 12 months.

Oklahoma Oral Health Needs Assessment of Third Grade Children

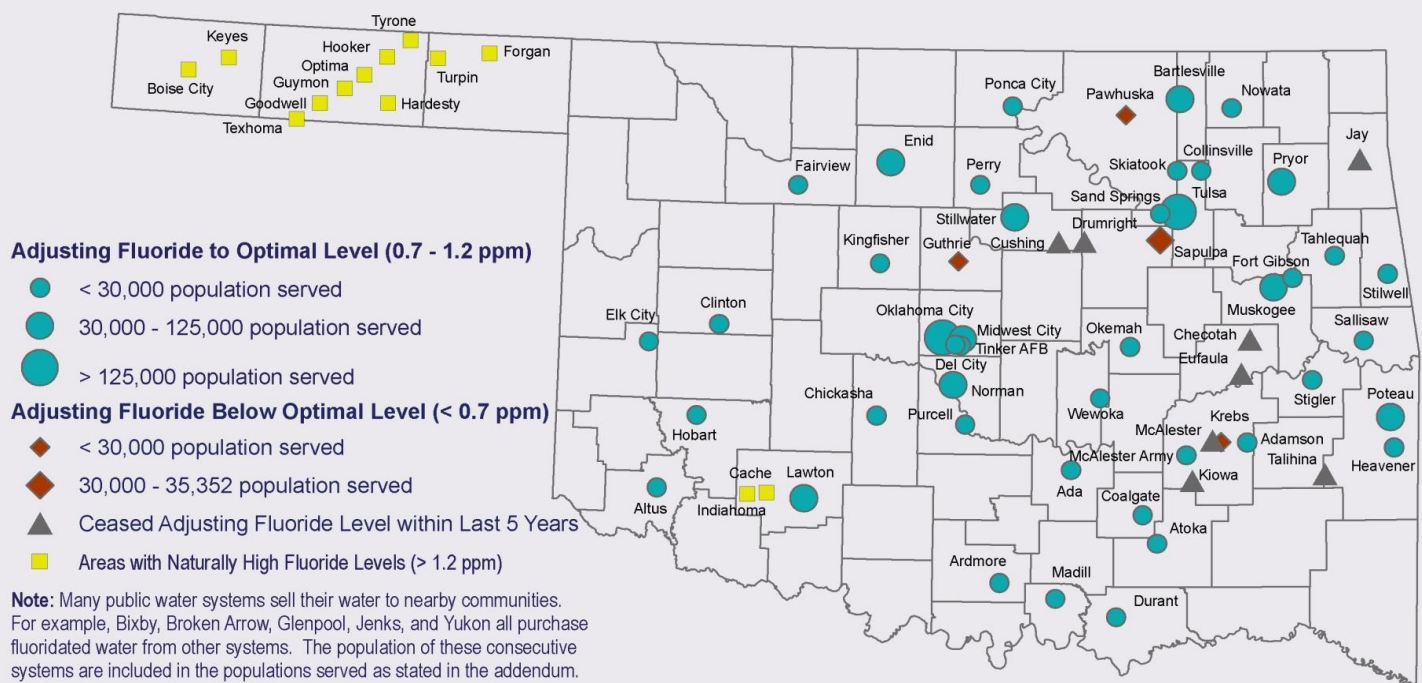
- An oral health survey of 3rd grade children is performed every 3-5 years in randomly selected schools statewide in partnership with University of Oklahoma Colleges of Dentistry and Public Health.
- Data collected on sealants and caries experience.

FY 12 Dental Health Service Significant Accomplishments

- OSDH staff held leadership roles in the Oklahoma Mission of Mercy providing free dental services to 1,700 persons in need.
- Created a State Fluoridation Plan.
- Initiated a Community Water Fluoridation Outreach Effort.
- The Governor's Task Force on Children and Oral Health Implementation Focus Group and the Children's Oral Health Coalition continued development of (1) school entrance dental examinations, (2) school-based sealant program and manual, and (3) physician training and reimbursement for preventive services such as fluoride varnish.



Status of Public Water System Fluoridation Levels with Reference to the Optimal Range for Dental Health (0.7 - 1.2 ppm)



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Dental Health Service
Community and Family Health Services
Oklahoma State Department of Health
Map created by Health Care Information
on 12.21.2009. Revised 05.23. 2012

Family Support & Prevention Service

Service Chief: Annette Jacobi, J.D.

Children First Nurse Family Partnership (C1)

Target Population

- Client must be a first time mother; income must be at or below 185% of Federal Poverty Level; and must be less than 29 weeks pregnant at enrollment.

Program Description

- Services are based on the Nurse Family Partnership Model, an evidence-based nurse home visitation program providing a wide range of family support services.

FY 11 Services:

- 34,217 visits provided to 3,616 families.

Office of Child Abuse Prevention (OCAP)

Target Population: Client must be expecting a baby; parents of infants who enroll within one year after the birth of their child; families that screen and assess positive for abuse risk factors; and families that voluntarily accept program services.

Program Description

- Services are based on the Healthy Families America® concept model and implemented using the Parents as Teachers® curriculum, an evidence-based curriculum.
- Provides home visitation and center-based services.

FY 11 Services Provided

- Unduplicated number of clients served: 1,875 families with 723 new enrollees.
- Home visits were provided to 1,875 families.



Community-Based Child Abuse Prevention (CBCAP)

- CBCAP is a federal grant/program designed to support the development and expansion of community-based and prevention-focused programs and activities to support and strengthen families and prevent child abuse and neglect (e.g. voluntary home visiting programs, respite and crisis care, parent support, family resource centers, and other family support programs).

Strengthening Families Initiative (SF)

- Geared toward early childhood education, child care, afterschool programs, community programs targeting parents and children.
- Child Care Centers were able to be awarded mini grants to make some type of change in their center that would involve families more in their program. Some created clothing/diaper resource rooms for parents, while others made physical changes to their buildings that made them more family friendly.
- Pilot sites implemented parent involvement projects of their choosing such as parent resource libraries.
- Ongoing mentoring and stipends to pilot sites to increase quality care. Spring training will include “role plays – approaching and listening to parents” and some Front Porch Training components. Fall will include mentoring at each pilot site for one morning and one afternoon per week for 3 months.
- Continued partnering opportunities are taking place with Oklahoma Department of Human Services/Child Welfare, Oklahoma State University Cooperative Extension Services, Tulsa Community College and the Early Childhood Program at the OU/Tulsa Campus.

Child Abuse Training and Coordination (CATC)

Program Description

- Provides training to District Attorneys, Judges, Law Enforcement, Child Welfare, Medical Professionals, Mental Health Professionals, Multidisciplinary Teams (MDTs), Child Advocacy Centers (CACs).
- Improves the response to child abuse and neglect and domestic violence through the promotion of multidisciplinary and discipline specific training for professionals with responsibilities affecting children, youth and families.
- Facilitates development of multidisciplinary child abuse and neglect teams.
- 21 member council that meets monthly and advises CATC on training and program needs.



FY 11 Services

- 33 trainings provided to child abuse professionals statewide.
- Trainings reached approximately over 1,000 child abuse professionals statewide.

Alternatives to Abortion

- Legislative line item that provides funding for services that promote childbirth instead of abortion by providing information, counseling and support services that assist pregnant women or women who believe they may be pregnant to choose childbirth and to make informed decisions regarding the choice of adoption or parenting with respect to their children.

FY 11 FSPS Significant Accomplishments

- Mothers who reported smoking cigarettes during SFY 2011 in the C1 program reduced both the frequency of smoking and number of cigarettes smoked during the pregnancy period. At program intake, 18.2% of mothers reported smoking compared to 10.1% at 36 weeks gestation.
- 90.7% of all children participating in C1 (birth to 24 months) were up-to-date on their vaccination schedules at all times.
- 89.1% of C1 babies were carried to term (37 or more weeks.)
- 90% of C1 babies were born at normal birth weights (more than 5 lbs. 9 oz.).
- Analysis by Nurse-Family Partnership of Oklahoma data from July 1, 2001 through June 30, 2011, shows 81% of clients initiated breastfeeding.
- Through collaboration with the Office of Tobacco Use Prevention, all C1 nurses received training in how to utilize Motivational Interviewing and the Five A's to decrease number of clients who smoke.
- Analysis by Nurse-Family Partnership of Oklahoma data from July 1, 2001 through June 30, 2011, shows statistically significant reductions in: Smoking during pregnancy; Marijuana use during pregnancy; Alcohol use during pregnancy; and Experience of violence during pregnancy.
- OCAP provided 9 Health Families America trainings to contract program staff.
- At the most recent update, 40% of the Start Right participants that smoke reported they were attempting to reduce their rate of smoking.
- Among those Start Right mothers who gave birth, 72% initiated breastfeeding. The overall state rate for any woman who has a live birth and was breastfeeding is 77%. Considering the fact that Start Right participants are part of an at-risk population, the Start Right rate should be viewed as a success.
- 93% of the Start Right children were up-to-date on their immunizations. Only 70% of all Oklahoma children completed the primary series of 15 doses according to the Centers for Disease Control.



Maternal and Child Health Service

Service Chief: Suzanna Dooley, MS, APRN-CNP

Child and Adolescent Health Division

Target population: 0 through 21 years of age

General Activities

- Assure health of all Oklahoma infants, children, and adolescents.
- Develop state health care policies and procedures based on federal and state requirements as well as recognized national guidelines and best practices.
- Provide resources, technical assistance, consultation, and monitoring of health care services
- Monitor health status of the target population.

Child Health Services

Program Description

- Provide gap-filling services with a priority of serving the uninsured and underinsured populations: physical exams, indicated lab, and/or treatment of minor acute illnesses.
- In SFY 2012 providing clinical services as indicated in all county health departments.

Services Provided

- Under the Title V Block Grant, MCH provided population-based, infrastructure, enabling, and direct client services to 675,367 children, which includes children <21 years of age.

Sudden Infant Death Syndrome (SIDS)/Infant Safe Sleep

- Provide leadership and serve as a resource for SIDS and Infant Safe Sleep activities at the state and community levels.

Breastfeeding

- Provide leadership and serve as a resource to promote and support state and community level breastfeeding activities.



Adolescent Health

- Assist communities and organizations in promoting and building resilience in youth and addressing health challenges.
- Develop programs that reduce risk-taking behaviors of adolescents (violence, suicide, unintentional injury, substance abuse).
- Implement teen pregnancy prevention strategies through community-based teen pregnancy prevention projects.

Early Childhood Comprehensive Systems

- Supports leadership and infrastructure for state early childhood system which includes: access to health insurance and a medical home; mental health and social-emotional development; early care and education/child care; parenting education; and family support.

Injury Prevention

- Support for Oklahoma Poison Control Center.
- Provide resources, technical assistance and training to prevent bullying, youth suicide, etc.
- Provide resources and technical assistance in reducing infant abusive head trauma.

School Health

- Provide leadership and coordination for preventive health and safety services to children and families through collaborative partnerships with other state agencies & organizations.
- Activities include development of policy and standards; provision of technical assistance, assessment, outreach, training, and resources.



Perinatal and Reproductive Health Division

Target Population: females and males of reproductive age.

General Activities

- Assure health of all Oklahoma infants and reproductive age women and men.
- Develop state health care policies and procedures based on federal and state requirements as well as recognized national guidelines and best practices.
- Provide resources, technical assistance, consultation and monitoring of health care services; and
- Monitor health status of the target population.

Family Planning Program

Program Description

- Assist males and females to make informed decisions regarding family planning services and preconception health screening.
- Promote family involvement and provide community-based education and outreach activities.
- Provide physical exams, indicated lab (e.g., pap screening, sexually transmitted disease screening), pregnancy diagnosis and counseling, education and counseling on prevention of pregnancy and sexually transmitted diseases, information on the different contraceptive methods available, provision of contraceptive methods, and as indicated, referral.
- In SFY 2012, provided clinical services in 70 counties and 96 sites.

Services Provided:

- Served 59,060 individuals in SFY 2012.



Perinatal Health Services

Program Description:

- Provide gap filling maternity clinical services with a priority of serving the uninsured population: physical exams, indicated lab (e.g., blood, urine, pap screening, sexually transmitted diseases screening), education, counseling and as indicated, referral.
- In SFY 2012, provided clinical services in 6 counties.
- Provide preventive health education for women (preconception and interconception) and men of reproductive age.
- Provide leadership for quality improvement initiatives and best practices through collaborative partnership with other state agencies and organizations.

Services Provided:

- Under the Title V Block Grant, MCH served 79,930 Oklahoma pregnant women through population based, infrastructure, enabling, and direct services during 2011.
- Preconception/Interconception health care and education provided in family planning clinics.

Maternal Mortality Review

- Review of all deaths to women while pregnant or within 1 year of termination of pregnancy from any cause related to or aggravated by the pregnancy.
- Multi-disciplinary team review; team reviews deaths quarterly.
- Will recommend systems improvements to reduce preventable maternal deaths and improve pregnancy outcomes when enough cases have been reviewed to identify trends..



Fetal and Infant Mortality Review

- Review of fetal and infant deaths.
- Contracts with Oklahoma City County Health Department and Tulsa Health Department.
 - Expanding activities to include metropolitan statistical areas.
- Recommend systems improvements to reduce the number the number of preventable fetal and infant deaths and improve infant outcomes.

Maternal and Child Health Assessment

General Activities:

- Activities include population-based surveillance for assessing risk factors associated with poor health outcomes; program reporting to monitor services offered through local health departments and community clinics; and other surveys to assess health systems and health status of specific MCH populations.
- Contributes evaluation and assessment support to the programs and services provided by MCH and CFHS and collaborates with researchers on health issues affecting the MCH targeted populations.
- Systematically collects, analyzes, interprets, and reports data in support of decision making, program development, and policy formulation related to maternal, infant, and child populations. Examples of supported efforts include “Preparing for a Lifetime, It’s Everyone’s Responsibility” and Every Week Counts.

Pregnancy Risk Assessment and Monitoring System (PRAMS)

- Ongoing statewide surveillance that collects information about a woman’s behaviors and experiences before, during and after pregnancy with information used to guide policy and services to improve mother and infant outcomes.
- Provides data on preconception health, pregnancy intention, prenatal care, breastfeeding, tobacco use, infant safe sleep, postpartum depression, and maternal stressors.

The Oklahoma Toddler Survey (TOTS)

- Ongoing statewide surveillance that is a two-year follow-back survey to the PRAMS.
- Collects data about the health and well being of Oklahoma’s toddler population with information used to guide programs and health policy in Oklahoma.
- Includes questions about healthcare and insurance coverage, illness and injury, childcare, safety, breastfeeding, and family structure.



First Grade Survey (1GHS)

- Statewide survey administered during the Fall semester of every odd-numbered year.
- 1GHS was designed to assess the health, healthcare needs, and healthcare access issues in Oklahoma's early school-aged population.

Fifth Grade Survey (5GHS)

- Statewide survey administered during the Spring semester of every even-numbered year.
- 5GHS was designed to assess the health, healthcare needs, and healthcare access issues in Oklahoma's early school-aged population.

Youth Risk Behavior Survey (YRBS)

- Statewide survey of Oklahoma public school students in grades 9-12; administered during the spring semester of every odd-numbered year.
- Measures prevalence of health risk behaviors such as sexual behaviors; alcohol, tobacco, and drug use; behaviors contributing to unintentional injury and violence, and physical activity and dietary behaviors.

State Systems Development Initiative (SSDI)

- Special grant from MCHB designed to develop a multi-linked database that includes data from state registries, population-based surveillance, client services and Medicaid eligibility and reimbursement files for more effective monitoring and evaluation of the health status of the MCH populations.
- SSDI grant has linked PRAMS data to data from the Oklahoma Birth Defects Registry and currently has an active project linking birth certificate data and PRAMS data to WIC client services data. Other projects are planned to join birth data with hospital discharge and newborn screening records.

Medicaid – MCH Data Linking Project

- Collaborative OSDH/OHCA data linking project (e.g., Medicaid, Vital Records, PRAMS) and analyses of data for quality improvement, evaluation and setting of policy, etc.



Fetal and Infant Mortality Review

- Review of fetal and infant deaths.
- Contracts with Oklahoma City County Health Department and Tulsa Health Department.
 - Expanding activities to include metropolitan statistical areas.
- Recommend systems improvements to reduce the number the number of preventable fetal and infant deaths and improve infant outcomes.

Maternal and Child Health Assessment

General Activities:

- Activities include population based surveillance for assessing risk factors associated with poor health outcomes; program reporting systems to monitor services offered through local health departments and community clinics; and other surveys to assess health systems and health status of specific MCH populations.
- Contributes evaluation and assessment support to the programs and services provided by MCH and CFHS.

Pregnancy Risk Assessment and Monitoring System (PRAMS)

- Ongoing statewide surveillance that collects information about a woman's behaviors and experiences before, during and after pregnancy with information used to guide policy and services to improve mother and infant outcomes.

Oklahoma Toddler Survey (TOTS)

- Ongoing statewide surveillance that is a two-year follow-back survey to the PRAMS.
- Collects data about the health and well being of Oklahoma's toddler population with information used to guide programs and health policy in Oklahoma.
- Includes questions about healthcare and insurance coverage, illness and injury, childcare, safety, breastfeeding, and family structure.



First Grade Survey (1GHS)

- Statewide survey administered during the Fall semester of every odd-numbered year.
- 1GHS was designed to assess healthcare needs and access issues in Oklahoma's early school-aged population.

Fifth Grade Survey (5GHS)

- Statewide survey administered during the Spring semester of every even-numbered year.
- The 5GHS assesses access to healthcare; prevalence of certain health conditions; substance use of alcohol and tobacco, and injuries, as well as household demographics of 5th grade children.

Youth Risk Behavior Survey (YRBS)

- Measures prevalence of various self-reported risk taking behaviors among Oklahoma public high school students in grades 9-12 administered every odd-numbered year.
- Indicators for adolescent health in the YRBS include sexual behaviors; alcohol, tobacco, and drug use; behaviors contributing to unintentional injury and violence, and physical activity and dietary behaviors.

State Systems Development Initiative (SSDI)

- Special grant from MCHB designed to develop a multi-linked database that includes data from state registries, population-based surveillance, client services and Medicaid eligibility and reimbursement files for more effective monitoring and evaluation of the health status of the MCH populations.

Medicaid – MCH Data Linking Project

- Collaborative OSDH/OHCA data linking project (e.g., Medicaid, Vital Records, PRAMS) and analyses of data for quality improvement, evaluation and setting of policy, etc.



FY 12 Maternal and Child Health Service Significant Accomplishments

Ongoing:

- Infant mortality initiative (Preparing for a Lifetime, It's Everyone's Responsibility).
 - Focus Areas: Preconception/Interconception Health; Prematurity; Tobacco; Postpartum Depression; Breastfeeding; Infant Safe Sleep; Infant Injury Prevention; data; and Communication.
- Collaborative work with the Oklahoma Health Care Authority (OHCA) to bring about changes in Medicaid policies for children and pregnant women (Child Health Advisory Task Force and Perinatal Advisory Task Force).
- Initiation of data base linkages (Medicaid/Vital Record/PRAMS).
- Expansion of teen pregnancy prevention projects in multiple administrators areas.
- Hospital focused quality improvement activities (Preparing for a Lifetime, It's Everyone's Responsibility).
 - Provide support and technical assistance for breastfeeding, abusive head trauma, infant safe sleep, tobacco prevention, and prematurity.
 - "Every Week Counts" collaborative.
 - Implementation of project to improve quality of data/information reported on birth certificates.

NEW:

- 2012 Infant Mortality Summit
- Baby-Friendly Hospital Initiative



Early Intervention Program (SoonerStart)

Service Chief: John Corpolongo, M.S.

Target Population

- Provides early intervention services statewide to infants and toddlers with developmental delays (birth to 36 months) and their families who are eligible under federal law and the Oklahoma Early Intervention Act.
- The State Department of Education serves as lead agency and the OSDH provides direct services through an interagency contract.

Program Description

- Conditions eligible for services include, but are not limited to Down syndrome, cerebral palsy, spina bifida, communication disorders, cognitive disabilities, motor impairments, auditory or visual disabilities and autism spectrum disorders.
- Individualized services include both evaluations and intervention and are provided by highly qualified providers such as speech-language pathologists, occupational and physical therapists, early childhood specialists, nurses, psychological clinicians, social workers, nutrition therapists and others.

Services Provided

- For state fiscal year 2012 (SFY12), 12,899 children aged birth to 3 years were funded to receive screening, evaluation, assessment and services.
- During this same time period, a year-end monthly caseload of 2,923 infants and toddlers was funded, which includes children not eligible for the program, but referred to other programs for services.



SFY 12 SoonerStart Significant Accomplishments:

- SoonerStart providers continue to use an on-line tool (AutismPro) to improve the program's individualized service plans for children with an autism spectrum disorder. Additional training was provided to meet the program's goal for having staff trained in each region to provide evidence-based screening procedures for autism.
- During this time period, 59% of infants and toddlers served were functioning within age expectations by the time they exited the program for their social-emotional skills, 56% in acquiring and using knowledge and skills, and 65% in taking appropriate action to meet their needs. This is significant in view of the children served by SoonerStart have developmental delays or disabilities, or are at high-risk for these conditions.
- Eighty-eight percent (88%) substantially increased their rate of growth in social-emotional skills, 87% in acquiring and using knowledge and skills, and 87% in taking appropriate action to meet their needs.
- These outcomes are reported to the United States Department of Education, Office of Special Education Programs (OSEP) as part of the program's quality improvement and accountability process.



Community Epidemiology & Evaluation

Director: Miriam McGaugh, PhD

Target Population: Community & Family Health Services and Community Development Service Programs

Description:

- Provide epidemiologic, statistical, and evaluation support to all program areas.
CFHS programs - Dental Services, Family Support & Prevention, Sooner Start, WIC, and 68 county health departments
CDS programs - Office of Primary Care & Rural Health, Turning Point, Health Education & Promotion, Office of Minority Health, and the Health Equity & Resource Opportunities
- Coordinates and ensures a competent analytical staff among CFHS program areas through trainings and technical assistance.
- Provides technical support on database development and management
- Current Evaluation Studies – Coordinated Approach to Child Health (CATCH) Kids Club; Oklahoma State Medical Association Weight Management Clinic
- Develops State of the County Health Reports



Women, Infants, and Children Program

Service Chief: Terry Bryce

Target Population: The target population for WIC is pregnant, breastfeeding, and postpartum women, infants, and children up to the age of five. The income level has to be less than or equal to 185% of the poverty level, and participants must reside in the state of Oklahoma.

Divisions

- **Administrative Division**
- **Operations Division**
- **Nutrition Division**

Services

- The unduplicated caseload count served for SFY 2016 was 161,778. It should be noted funding for the program is related to an annualized FFY duplicated caseload number.
- Quality nutrition education and services.
- Breastfeeding promotion and education.
- Monthly supplemental foods containing specific nutritional content.
- Referrals and providing access to other health-care services.
- Supplemental foods provided through a network of 438 WIC vendors (grocers).



WIC Service Significant Accomplishments

- Completed successful statewide implementation of eWIC, utilizing a plastic mag stripe card instead of paper food instruments to deliver participant benefits.
- Component of Oklahoma eWIC will be implemented nationwide simplifying the ordering procedure of special formulas for infants with medical needs.
- Reached agreement with the nine Indian Tribal WIC programs in Oklahoma to partner in a State WIC conference. The Osage Nation will financially sponsor the conference.
- OSDH WIC's breastfeeding initiation rate of 82.1% exceeded Healthy People's 2020 breastfeeding initiation goal of 81.9% in 2014 and continues to climb to the current rate of 85.9%.
- The Breastfeeding Peer Counseling Program has experienced continued growth with expansion to 25 counties and 39 clinics statewide with additional clinics expressing interest in this evidence-based program. Plans are proceeding to collaborate with hospitals interested in having WIC Breastfeeding Peer Counselors work with their newborn infants and mothers to support breastfeeding.
- WIC participants are offered a variety of nutrition education choices to best meet their needs. Participants may attend group classes for facilitated discussion and interaction with others, access online nutrition education when it best fits their schedule or attend an appointment with the clinic's Registered Dietitian to receive individualized nutrition counseling. Currently, a pilot to utilize videoconferencing for group nutrition education is underway to reduce the nutrition therapist's time in travel to multiple clinics, provide coverage for nutrition therapist vacancies, and to make better use of time for provision of specialized nutrition education.
- Selected as Program of the Year for OSDH central office for CY 2016.
- State WIC Director selected by USDA to serve on the National Advisory Council on Maternal, Infant and Fetal Nutrition, representing all State WIC Directors nationwide.

FFY 2017 Challenges and Opportunities

- Continue efforts to reach WIC eligible population to participate in the program. Pursue opportunity to use technology to streamline participant services at the clinic and grocery store level, examples include continued expansion of on-line nutrition education, a grocery store app allowing participants to utilize their cell phones to insure a food item is WIC approved. We are currently exploring the use of text messages to remind participants of their appointments.



Records Evaluation and Support

Director: Mike Ewald

Records Evaluation and Support Division is an infrastructure unit that provides records management and operations support to the county health department administrators and staff. This unit coordinates with central office programs to implement new initiatives and monitor ongoing activities. The unit also includes the agency's HIPAA Privacy Officer.

RES consists of:

- Eight regionally housed Records Consultants. These consultants are experts in OSDH computer systems, financial reporting requirements and clinical records procedures;
- One temporary retired former consultant who maintains the user manuals for OSDH created software, such as PHOCIS, ISS and LEP;
- The HIPAA Privacy Officer, tasked with maintaining OSDH compliance with HIPAA regulations;
- Two administrative support staff; and
- The Director – an employee with over 35 years of county health department and central office experience.

